

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	N.A.		11/29/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	fa	780	12-07-01
RESPONSE FORMALITY REVIEW			

Best Available Copy

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date	Claim	Date	Claim	Date
Final		Original			
1	2-6-02	2	11/13/02	3	
3		4		5	
5		6		7	
7		8		9	
9		10		11	
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13		14		15	
15		16		17	
17		18		19	
19		20		21	
21		22		23	
23		24		25	
25		26		27	
27		28	✓ ✓	29	✓ ✓
28		30	✓ ✓	31	✓ ✓
29		32	✓ ✓	33	✓
30		34	✓	35	✓
31		36	✓	37	✓
32		38	✓	39	✓
33		40	✓	41	✓
34		42	✓	43	✓
35		44	✓	45	✓
36		46	✓	47	✓
37		48	✓	49	✓
38		50	✓		
39				101	
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If more than 150 claims or 10 actions
staple additional sheet here

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DC676
12/07/01